# NDDoH Sexual Violence and Intimate Partner Violence Prevention Toolkit Webinar

## November 19 and December 10 Survey Findings

#### INTRODUCTION

The toolkit was developed as part of Goal 3 of the North Dakota Intimate Partner and Sexual Violence Prevention Plan to increase the use of evidence-based primary prevention strategies in communities around North Dakota. The toolkit contains resources for the prevention or elimination of sexual and intimate partner violence that any agency, school, or organization can use in their work.

#### Toolkit Webinar

A webinar geared toward domestic violence/rape crisis service providers was held on August 26 and attended by 20. To further promote the toolkit and its resources subsequent webinars were held on November 19 and December 10. The webinar announcements were marketed to an expanded audience including local public health units, campus partners, schools, youth prevention organizations, extension offices, suicide coalitions, tribal partners, family planning programs, catholic health initiative violence prevention program, human trafficking partners as well as a variety of other contacts that have been involved with injury prevention. Twenty three attended the November 19 webinar and seventeen attended the December 10 webinar for a total of 40 participants.

The webinars provided an introduction to the North Dakota Sexual Violence and Intimate Partner Violence Prevention Toolkit website. It included an overview of primary prevention, the social-ecological model, and the public health approach to ending sexual violence. A tour of the website included ways to engage stakeholders, activities that support primary prevention, evaluation methods, prevention in ND, and many other resources.

These webinars were also to serve as a launching point for a statewide group, Primary Prevention Partners, whose goal is to share activities, discuss collaboration potential and leverage resources related to primary prevention in the state. Eleven attendees provided their contact information when asked if they were interested in participating in this new group.

#### Toolkit Webinar Interactions

During the webinar, participants were invited to interact through polling questions and chat boxes. This report summarizes their responses and highlights correct responses to the knowledge questions.

#### Toolkit Webinar Survey

Following the webinar, participants were asked to complete a survey assessing toolkit and webinar satisfaction as well as plans to share the toolkit with others.

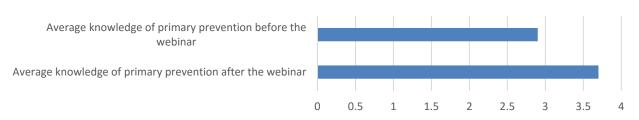
\*Orange indicates incorrect responses and blue indicates desired responses.

## Survey Findings, Correct Responses and Resources

### Primary Prevention Knowledge

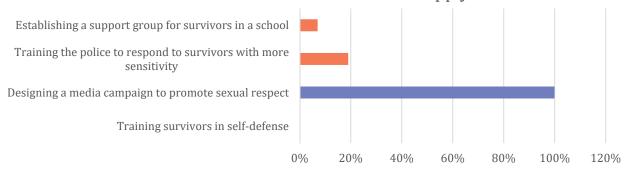
Participant knowledge of Primary Prevention resources at the beginning and end of webinar on a scale from 1 to 5, where 1 is No Knowledge and 5 is Expert Knowledge.

# Participants report a .08 point increase in knowledge after the webinar



### Primary Prevention Programming

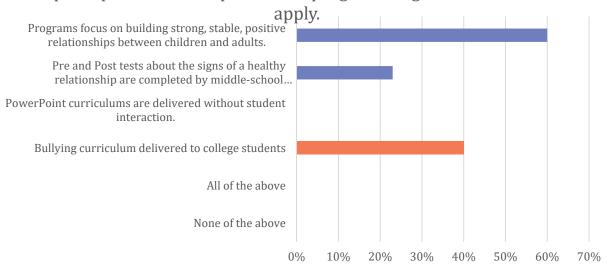
# Which of these are appropriate topics for primary prevention of sexual violence? Check all that apply.



**Correct Response:** Designing a media campaign to promote sexual respect.

**Explanation:** When designing primary prevention programming the message is key. It is not what you do (the type of activity) that makes it primary—it is the type of message that makes it primary prevention. You can have classes, trainings, groups or other activities, but if the topic isn't about changing social norms or healthy relationships—then it isn't primary prevention. The before and after game in the toolkit is a great exercise to help people understand this and can be found here: <a href="http://www.ndhealth.gov/injury/nd">http://www.ndhealth.gov/injury/nd</a> Prevention Tool Kit/ExercisesAndActivities.html

# Which of the following statements would be considered a principle of effective prevention programming? Check all that

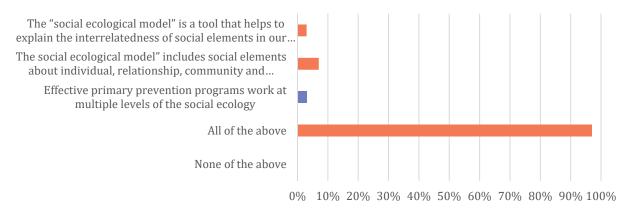


**Correct Responses:** Programs focus on building strong, stable, positive relationships between children and adults. Pre and Post tests are completed to measure knowledge learned from curriculum.

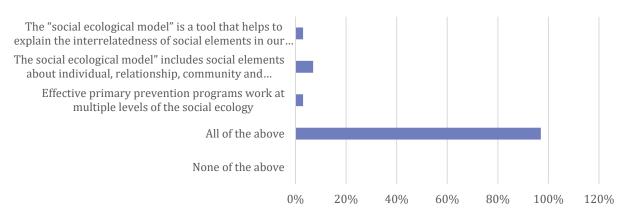
**Explanation:** Research has shown that there are nine overarching principles of effective prevention education programs. They must be comprehensive, use varied teaching methods, provide sufficient dosage, be theory driven, foster positive relationships, be appropriately timed, use well trained staff, be socio-culturally relevant and include outcome evaluation. Bullying curriculum delivered to college students is not considered appropriately timed as college students have likely encountered bullying already. Curriculums delivered without student action would not be considered varied teaching methods. The Improve Group created an activity to examine curriculum based educational prevention programs and to identify ways they could be strengthened to improve effectiveness. More information and the activity can be found here: http://www.ndhealth.gov/injury/nd Prevention Tool Kit/PrimaryPreventionPrograms.html

### Social-Ecological Model

# Which of the following statements are true about the "social ecological model"? Check all that apply.



# Which of the following statements are true about the "social ecological model"? Check all that apply.



**Correct Response:** All of the above (the "social ecological model" is a tool that helps to explain the interrelatedness of social elements in our social environment; the social ecological model" includes social elements about individual, relationship, community and societal interactions; effective primary prevention programs work at multiple levels of the social ecology

**Explanation:** The Social-Ecological Model provides a framework for prevention that demonstrates the four levels of society that impact violence. The four levels are individual, relationship, community and societal. Each level has factors that interact with those at different levels and an approach that targets multiple levels is more likely to have a sustained impact. For more information:

http://www.ndhealth.gov/injury/nd Prevention Tool Kit/PublicHealthApproach.html

### TOOLKIT WEBINAR ATTENDEE CURRENT EFFORTS

Several questions were asked about attendee efforts through chat boxes.

### What primary prevention programs is your organization implementing?

- Safe Dates (mentioned twice)
- Coaching Boys into Men (mentioned twice)
- Safer Tomorrows
- Friendships that Work local program
- Anti-bullying programs
- SAFE NeighBAR bystander intervention
- Teen Talk local program

#### What evaluation activities do you currently do?

- Organizational climate survey
- Pre and post tests for school presentations (mentioned 3 times)
- Teacher evaluations of presenter and content
- Community attitude and perception surveys
- Interviews and focus groups
- Learning outcomes
- National College Health Assessment
- Process Measures such as number of people who participated
- Quantitative follow-up interviews and qualitative surveys

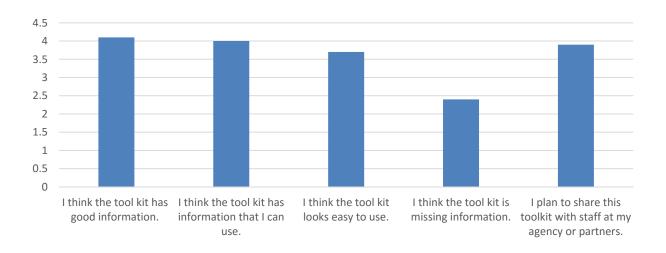
## TOOLKIT WEBINAR ATTENDEE LEARNINGS AND FUTURE LEARNING PRIORITIES

#### What about this toolkit excites you?

**Response Summary:** Attendees comments included: building a community of practice, linking different organizations together, ability to pass onto other officers that deal with these issues, having the information all in one place, learning about new resources, sharing information and ideas, being accessible, and connecting with others in the state working toward the same goal.

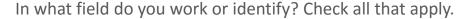
#### Toolkit Webinar Attendee Opinions

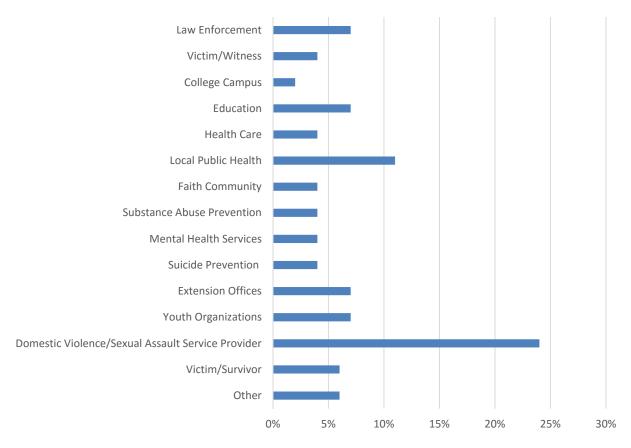
Please rate the following on a scale from 1 to 5, where 1 is Totally Disagree and 5 is Totally Agree.



Individuals attendees intend to share the toolkit with include local partners, colleagues, staff, professionals, board members, volunteers, educators, fellow advocates, supervisors and the injury prevention listserv.

Toolkit Webinar Attendees





Other: Judicial, Primary Prevention Educator

#### CONCLUSION

Overall survey respondents valued the opportunity to learn about the toolkit resource and agree that it has information that they can use in their work. We plan to continue to add resources to the toolkit and invite others to share prevention work being done on the toolkit. Additional webinar opportunities highlighting toolkit resources and primary prevention topics will be explored.